

VITAL STATISTICS DATA FILES APPLICATION

For Fraud Prevention or Law Enforcement Purposes

ORDERING INSTRUCTIONS

To purchase copies of the Vital Statistics Data Files for fraud prevention or law enforcement purposes, please follow these instructions:

- Complete the Application, send the Application and the required payment to the address indicated in the section below titled "PAYMENT AND MAILING INSTRUCTIONS".
- Please read the Application carefully and sign where indicated on the second page of the application. (Note that this signature is provided under penalty of perjury.)
- Notarized proof of identity is required for the person signing the Application. Space for notarization is provided on the second page of the Application.
- Please include, on your organization's letterhead, a description of the purposes for which the files will be used. Specify the proposed use of the SSN or MMN and the security measures that will be taken to protect the confidentiality of these data.
- Also provide a statement on your organization's letterhead, documenting how your organization meets the criteria for fraud prevention and/or law enforcement purposes as set forth in Health and Safety Code 102230(c).
- Please note the following caveats regarding Out-of-State Deaths: Out-of-State Deaths are those deaths that occurred to California residents in another state. All personal identifiers (including name of decedent) for these deaths are subject to the confidentiality laws of the state of occurrence. California cannot release Out-of-State personal identifiers for fraud prevention or law enforcement purposes; permission must be obtained from the state of occurrence. If out-of-state personal identifiers are needed, please contact Office of Health Information and Research (OHIR) at (916) 552-8095 or CDPHOHIR@cdph.ca.gov for further information.

PAYMENT AND MAILING INSTRUCTIONS

We can not accept credit cards or purchase orders as a form of payment. Payment is required before data files can be released. If an invoice is needed in order to process a check, please contact the OHIR at (916) 552-8095 or CDPHOHIR@cdph.ca.gov. Please do not mail checks or money orders without a copy of the application or an invoice.

Mail the completed application material with your check or money order to:

**California Department of Public Health
Office of Health Information and Research
Attn: Data Request Desk
P.O. Box 997410, MS 5101
Sacramento, CA 95899-7410**

Fed-Ex Deliveries: Fed-Ex deliveries are not accepted using the P.O. Box above. If you would like to Fed-Ex your completed application and payment, please contact OHIR at (916) 552-8095 or CDPHOHIR@cdph.ca.gov for the physical location. If you would like the CDs delivered via Fed-Ex, you must supply your Fed-Ex account number or a credit card billing number.

The California Department of Public Health's Federal Taxpayer ID Number is 74-3204993.

Additional copies of this application can be downloaded from the Center for Health Statistics website at: www.cdph.ca.gov/programs/ohir